Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | | SMALL ENTITY TYPE | | OR | OTHER THAN | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|-------------------------------------------|---------------------------------------|-------------------------------|--------------|------------------|--------------------------------------------------|------------------------|---------|---------------------|------------------------|
| TOTAL CLAIMS | | | 2 | | | | RATE | FEE |] | RATE | FEE |
| EOR | | | () | | | 5D 5)(72) | | | | | |
| FOR | | | NUMBER FILED | | NUMBI | ER EXTRA | BASIC FE | E 375.00 | OR | BASIC FEE | 750.00 |
| TOTAL CHARGEABLE CLAIMS | | | minus 20= | | * 100 | | X\$ 9= | | OR | X\$18= | |
| INDEPENDENT CLAIMS | | | minus 3 = | | | 5 | X42= | | OR | X84= | |
| | | DENT CLAIM PI | | | | | +140= | | OR | +280= | |
| * If | the difference | in column 1 is | less than zero, enter "0" in column 2 | | | | TOTAL | 279 | OR | TOTAL | |
| CLAIMS AS AMENDED - PART II | | | | | | | | | | OTHER | |
| | × | (Column 1) | | (Colur | | (Column 3) | SMALL | ENTITY | OR | SMALL | ENTITY |
| AMENDMENT A | | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUM PREVIO PAID | BER DUSLY | PRESENT EXTRA | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | | = | X\$ 9= | (6) | OR | X\$18= | |
| | Independent | * NTATION OF M | Minus | *** | | = | X42= | | OR | X84= | |
| | rinoi Frizoc | NIAHON OF W | JETIPLE DE | PENDEN | CLAIIV | | +140= | | OR | +280= | |
| | | | | | | | . TOTA | | OR | TOTAL ADDIT. FEE | * |
| | | (Column 1) | | (Colur | mn 2\ | (Column 3) | ADDIT. FEI | | 1 | ADDII. FEE | |
| AMENDMENT B | | CLAIMS | | HIGH | EST | | | ADDI- | 1 | | ADDI- |
| | | REMAINING AFTER AMENDMENT | | PREVIO PAID | OUSLY | PRESENT EXTRA | RATE | TIONAL FEE | | RATE | TIONAL FEE |
| | Total | * | Minus | ** | | = | X\$ 9= | | OR | X\$18= | |
| | Independent | * NTATION OF MI | Minus | *** | CL AIM | = | X42= | | OR | X84= | |
| | THOTFILOE | INTATION OF IM | JETH EL DE | PENDEN | CLANV | | +140= | | OR | +280= | |
| | | | | | | | TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | |
| | | (Column 1) | | (Colui | mn 2) | (Column 3) | AUDIT. PER | - | - | AUUII. FEE | |
| AMENDMENT C | | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUM PREVIO PAID | BER OUSLY | PRESENT EXTRA | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | | 2 | X\$ 9= | | OR | X\$18= | |
| | Independent | * | Minus | *** | T (2) A44.4 | - | X42= | | OR | X84= | |
| <u> </u> | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | | | +280= | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. | | | | | | | | | OR | TOTAL | |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. | | | | | | | | | | | <u> </u> |